



293/002 Div. 2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

Applicants : David S. Goldsteen et al.
Application No. : 09/955,244 Confirmation No.: 1651
Filed : September 17, 2001
For : MEDICAL GRAFTING METHODS AND APPARATUS
Group Art Unit : 3731
Examiner : Michael H. Thaler

New York, New York 10020

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

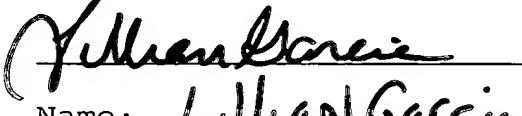
EXPRESS MAIL CERTIFICATION

"Express Mail" Mailing Label No. EV371749753US
Date of Deposit: February 16, 2005

I hereby certify that this certification and
the following papers and fees:

1. Transmittal Letter (in duplicate);
2. Reply to Office Action; and
3. Return postcard

are being deposited with the United States Postal Service
"EXPRESS MAIL POST OFFICE TO ADDRESSEE" service under
37 C.F.R. § 1.10 on the date indicated above and are
addressed to Mail Stop Amendment, Commissioner for
Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.


Name: Lillian Garcia

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TRANSMITTAL LETTER

Sir:

Transmitted herewith: [] a Preliminary Amendment;
 a Reply to Office Action; [] a Declaration; [] a Power
of Attorney; [] a Submission of Formal Drawings; to be filed
in the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

A fee for additional claims is not required.

[] A fee for additional claims is required.

The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	24 - 27	* = 0	X \$ 50	= \$ 0.00
INDEPENDENT CLAIMS	1 - 1	** = 0	X \$ 200	= \$ 0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM			+ \$ 360	= \$ 0.00

* If less than 20, insert 20.

TOTAL \$ 0.00

** If less than 3, insert 3.

[] A check in the amount of \$ _____ in payment of the fee for additional claims is transmitted herewith.

[] Please charge \$ _____ to Deposit Account No. _____ in payment of the fee for additional claims.

[x] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

[] The following extension is applicable to the Response filed herewith: [] \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [] \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [] \$1020.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); [] \$1590.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); [] \$2160.00 extension fee for response within fifth month pursuant to 37 C.F.R. 1.136(a).

[] A check in the amount of [] \$120.00; [] \$450.00; [] \$1020.00; [] \$1590.00; [] \$2160.00; in payment of the extension fee is transmitted herewith.

[] Please charge the [] \$120.00; [] \$450.00; [] \$1020.00; [] \$1590.00; [] \$2160.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

[x] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



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REPLY TO OFFICE ACTION

Sir:

In response to the Office Action dated November 16, 2004, applicants hereby amend the above-identified patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 9 of this paper.